

AF/163/4

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/758,872
		Filing Date	01/11/2001
		First Named Inventor	Eugene Wang
		Group Art Unit	1631
		Examiner Name	James Martinell
Total Number of Pages in This Submission	15	Attorney Docket Number	3284.1

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Replacement Drawing(s)	<input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<b>Return postcard</b>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is authorized to charge any fees or credit any overpayments associated with this application to Deposit Account No. 01-0431.	

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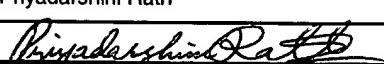
*TM/EP*

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Wei Zhou, Reg. No.: 44,419
Signature	
Date	09/19/2003

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Priyadarshini Rath		
Signature		Date	09/19/2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:  
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# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)  
**320**

<i>Complete If Known</i>	
Application Number	09/758,872
Filing Date	01/11/2001
First Named Inventor	EUGENE WANG
Examiner Name	JAMES MARTINELL
Group / Art Unit	1631
Attorney Docket No.	3284.1

**METHOD OF PAYMENT (check all that apply)**
 Check    Credit card    Money    Other    None  
 Order    Deposit Account:

Deposit Account Number	01-0431
Deposit Account Name	Affymetrix, Inc.

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below    Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1001	2001	750	375
1002	2002	330	165
1003	2003	520	260
1004	2004	750	375
1005	2005	160	80
<b>SUBTOTAL (1)</b>		(\$ 0)	

**2. EXTRA CLAIM FEES**

Total Claims	-20 **	=	0	X	Extra Claims	Fee from below	Fee Paid
Independent Claims	-3 **	=	0	X			
Multiple Dependent				X			

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1202	2202	18
1201	2201	84
1203	2203	280
1204	2204	84
1205	2205	18
<b>SUBTOTAL (2)</b>		(\$ 0)

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1051	2051	130	65
1052	2052	50	25
1053	1053	130	130
1812	1812	2,520	2,520
1804	1804	920*	920*
1805	1805	1,840*	1,840*
1251	2251	110	55
1252	2252	410	205
1253	2253	930	465
1254	2254	1,450	725
1255	2255	1,970	985
1401	2401	320	320
1402	2402	320	320
1403	2403	280	140
1451	1451	1,510	1,510
1452	2452	110	55
1453	2453	1,300	650
1501	2501	1,300	650
1502	2502	470	235
1503	2503	630	315
1460	1460	130	130
1807	1807	50	50
1806	1806	180	180
8021	8021	40	40
1809	2809	750	375
1810	2810	750	375
1801	2801	750	375
1802	1802	900	900
Other fee (specify) _____			

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)**

(\$ 320)

SUBMITTED BY		<i>Complete (if applicable)</i>		
Name (Print/Type)	Wei Zhou	Registration No. Attorney/Agent)	44,419	Telephone 408-731-5000
Signature			Date	09/19/03

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